

PART B - FEE(S) TRANSMITTAL

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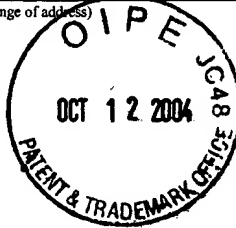
07/13/2004

Oliff & Berridge
PO Box 19928
Alexandria, VA 22320

10/13/2004 FMEK12 00000051 09857144

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1370.00 OP



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| |
|--------------------|
| (Depositor's name) |
| (Signature) |
| (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/857,144 | 02/08/2002 | Roger Denis | 109684 | 9251 |

TITLE OF INVENTION: SAFETY ASSEMBLY FOR A SYRINGE PRE-FILLED WITH LIQUID, IN PARTICULAR A MEDICINE

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------------------|-----------------|-----------------------|------------|
| nonprovisional | NO | \$430 1370 | \$0 | \$430 1370 | 10/13/2004 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
 1 OLIFF & BERRIDGE, PLC
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

COMPAGNIE PLASTIC OMNIUM

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lyon, France

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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- ☒ A check in the amount of the fee(s) is enclosed. w/ck# 159471 (\$1370)
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature) Klifton L. Kime (Date) 10/12/04
 Klifton L. Kime, Reg. No. 42,733

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